

Introduction

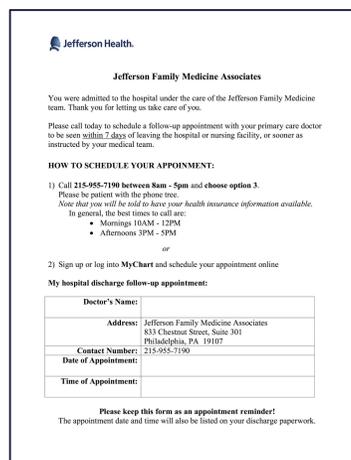
- Post-hospital discharge follow-up appointments with primary care provider are associated with lower 30-day readmission rates
- Follow-up appointments are critical opportunities to review discharge information, reconcile medications, and coordinate interdisciplinary care
- Of all patients discharged from the Jefferson Family Medicine Associates (JFMA) hospital service
 - Only **66.6%** had a follow-up appointment scheduled
 - Only **53.5%** completed a follow-up appointment within 14 days
- Currently, JFMA patients are verbally instructed to schedule a follow-up appointment with their PCP on the day of discharge

Aim

- Increase percentage of JFMA patients with follow-up appointment scheduled after discharge to 100% by March 2018
- Increase percentage of JFMA patients who show up to their follow up appointments after discharge to 80% by March 2018

Methods

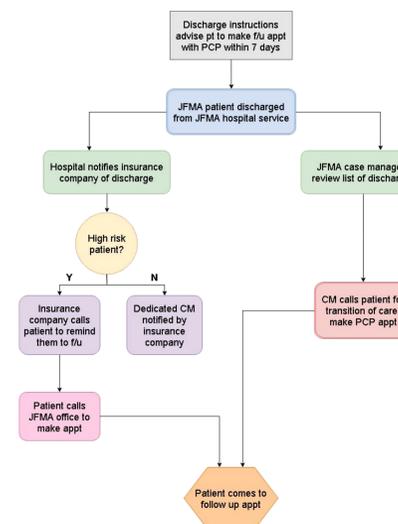
- Meeting with the following stakeholders:
 - JFMA residents and faculty
 - Sylvia Cruz, case manager
 - Liz Lewallen, population health specialist
- Brainstorming and prioritization of changes with resident team and advisor
- **PDSA #1:** October 16, 2017 - February 11, 2018
 - JFMA senior residents updated the patient's personal and emergency contact information in the electronic medical record (EMR)
 - Allowed case managers to contact patients more effectively and efficiently, to facilitate transition of care
- **PDSA #2:** February 12, 2018 - April 15, 2018
 - JFMA hospital team provided a self-directed appointment scheduling form, for the patient or caregiver to schedule their own appointments prior to discharge



Jefferson Health
Jefferson Family Medicine Associates
You were admitted to the hospital under the care of the Jefferson Family Medicine team. Thank you for letting us take care of you.
Please call today to schedule a follow-up appointment with your primary care doctor to be seen within 7 days of leaving the hospital or nursing facility, or sooner as instructed by your medical team.
HOW TO SCHEDULE YOUR APPOINTMENT:
1) Call 215-955-7190 between 8am - 5pm and choose option 3. Please be patient with the phone line. Note that you will be asked to have your health insurance information available. In general, the best times to call are:
• Mornings 10AM - 12PM
• Afternoons 3PM - 5PM
or
2) Sign up or log into MyChart and schedule your appointment online
My hospital discharge follow-up appointment:
Doctor's Name: _____
Address: Jefferson Family Medicine Associates, 833 Chestnut Street, Suite 301, Philadelphia, PA 19107
Contact Number: 215-955-7190
Date of Appointment: _____
Time of Appointment: _____
Please keep this form as an appointment reminder! The appointment date and time will also be listed on your discharge paperwork.

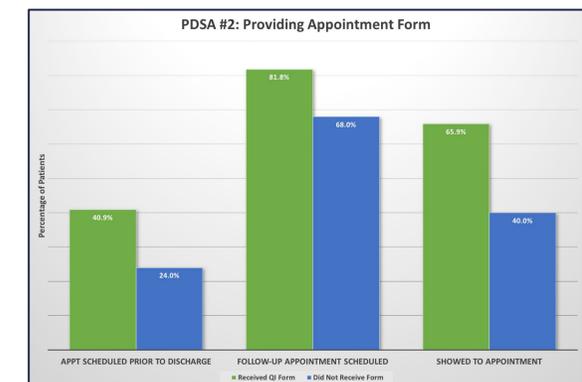
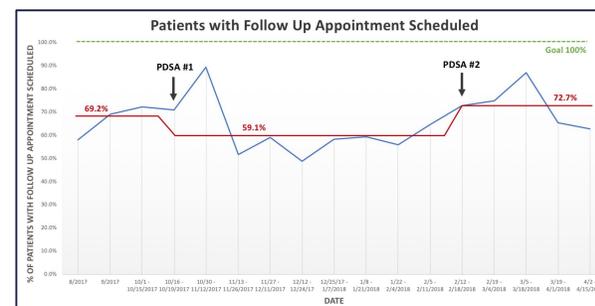
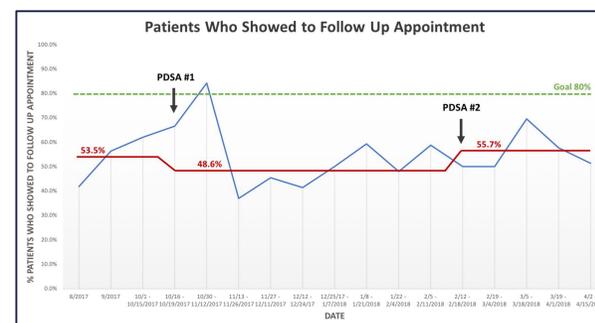
- Created a standardized **Epic report** to determine hospital discharge data
- Data collected: patient name, MRN, DOB, date of admission, date of discharge, discharge disposition, PCP insurance provider

Process Map



Results

- In PDSA #1, percentage of patients who had an appointment scheduled decreased to 59.1% from a baseline of 69.2% and percentage of patients who showed to their appointment decreased to 48.6% from baseline of 53.5%
- In PDSA #2, percentage of patients who had an appointment scheduled increased to 72.7% and percentage of patients who showed to their appointment increased to 55.7%
- During PDSA #2, a total of 44 patients received the intervention form
- Patients in PDSA #2 who received the intervention form were more likely to have a follow-up appointment scheduled and were more likely to show to those appointments



Discussion

- The primary outcome decreased after change #1, possibly reflecting a more accurate baseline
 - Many residents reported not updating contact information in the EMR (poor fidelity of intervention)
 - On chart review, the majority of phone numbers were correct
- For change #2, there was an increase in the primary outcome
 - The change was not robust enough to achieve our aim, but this may be due to provider non-compliance (fidelity of the intervention)
 - As a balancing measure, some residents noted difficulty in handing out the intervention form due to competing demands related to patient care
- Patients who *did* receive our intervention form in change #2 were more likely to schedule and to show to follow up appointments, suggesting this is a meaningful target for ongoing intervention. The use of existing resources may help facilitate meaningful change.

Future Directions

- Utilize alternative staffing to achieve sustainability
 - As a result of our project, there is now a new transition of care medical assistant
 - Plan to work on current and future interventions with this new MA
 - Requires further stakeholder involvement and brainstorming
- Determine patient satisfaction with newly implemented practices
- Consider implementing our intervention into a formal discharge checklist
- Consider expanding our intervention to other hospital services, not just JFMA

References:

- Grafft, C. A., McDonald, F. S., Ruud, K. L., Liesinger, J. T., Johnson, M. G., & Naessens, J. M. (2010). Effect of hospital follow-up appointment on clinical event outcomes and mortality. *Archives of internal medicine*, 170(11), 955-960.
- Dudas, V., Bookwalter, T., Kerr, K. M., & Pantilat, S. Z. (2001). The impact of follow-up telephone calls to patients after hospitalization. *The American journal of medicine*, 111(9), 26-30.